



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

This document provides line by line instructions for populating the IT ABC Form. Completion of this form is required for IT activities/projects that are expected to have lifecycle costs over \$500K.

### Instructions for Section 1

| 1. General Information  |        |                  |            |
|---|--------|------------------|------------|
| Date Submitted  |        | Agency           | Department |
| IT Activity/Project Name  |        |                  |            |
| Primary Objective   | Select | Agency IT Lead   |            |
| Sponsor   |        | Project Manager  |            |
| Business Lead   |        | Business Manager |            |
| Program Code  |        | Customer Code    |            |
| High Level Project Description ( <i>in ≤ 2 lines</i> )  |        |                  |            |
| Describe the Business Problem you are trying to solve   |        |                  |            |
| What is your Proposed Solution and Procurement Plan (i.e., RFP, contract extension, sole source, etc.)? |        |                  |            |

- **Date Submitted:** Date you email the form to the DII EPMO.
- **Agency:** Your Agency acronym. Ex: AOA
- **Department:** Your Department acronym. Ex: DII
- **IT Activity/Project Name:** Name you are calling the IT Activity/Project.
- **Primary Objective:** Check the primary objective for your IT Activity/Project from the list provided.
- **Agency IT Lead:** Enter the name of the CIO for your Agency. If there isn't a CIO, enter the name of the lead IT person for your Agency or Department. Note, we will ask this person to e-sign the form once the review process is complete. The purpose is to ensure your lead IT person is aware of all the technology projects happening in their area.
- **Sponsor:** The Senior Management level individual authorizing the resources and funding for this IT Activity.
- **Project Manager:** The person who will manage the project (could be internal or external/contracted resource). It might be unknown at the time you put this document together and if so, write "TBD." This person is subject to approval by the EPMO based on Vermont statute.
- **Business Lead:** Primary business contact for this IT Activity.
- **Business Manager:** Name of the person who handles the finances for the named Agency/Department.
- **Program Code:** The code the Business wants to use to designate this IT Activity on invoices for DII services (Enterprise Architecture, Oversight Project Management, Contracted Services through DII, etc.). **DII's Business Office will assign a Program Code to this IT Activity if this field is left blank.**
- **Customer Code:** Enter the customer code that should be listed on the invoice from the EPMO when billing for oversight.



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- **High Level Project Description:** Provide the description as you would like it to appear on the annual reports that the EPMO creates for the legislature and on the quarterly portfolio reports that the EPMO posts on our website. This can be changed/edited as needed as the project progresses.
- **Describe the Business Problem you are trying to solve:** Explain why you are pursuing this new solution.
- **What is your Proposed Solution and Procurement Plan:** Explain your plan for addressing the business problem described above and your procurement plans.

### Instructions for Section 2

The EPMO uses this section to determine if DII's Security group needs to be involved in this project and the review of the IT ABC form.

|  |   |
|--|---|
| <b>2. Information Security</b>   |   |
| Does the proposed solution store/transport/control access to confidential/sensitive/nonpublic information and/or represent significant reputational risk to the State? | Select <input type="button" value="v"/> |
| If Yes to the above, check all that apply below:   |   |
| <input type="checkbox"/> Personally Identifiable Information   |   |
| <input type="checkbox"/> Information regarding Credit Card payments  |   |
| <input type="checkbox"/> Health related information  |   |
| <input type="checkbox"/> Tax Information obtained from the Federal government  |   |
| <input type="checkbox"/> Information associated with minor children  |   |
| <input type="checkbox"/> Other Sensitive, Confidential, or Non-Public Information  |   |

- **Does the solution store/transport/control access to confidential/sensitive/nonpublic information and/or represent significant reputational risk to the State?** Select yes or no to provide an initial indication of risk for the State regarding data being processed. If "Yes" was chosen, check all applicable data types from the list provided.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 3

#### 3. Business Justification

IT projects are undertaken to achieve business objectives/values. EPMO categorizes Business Value (BV) into 4 types: Financial, Customer Service, Risk Reduction and Compliance. *Tip: If you expect to gain efficiencies, think about how the State will benefit from those efficiencies to determine your BV Type. Efficiencies should save the State money (BV= Financial) and/or improve customer service (BV= Customer Service). Note customer service improvements could come from freed-up resources that can be reallocated to other services provided by your Agency/Department.*

| BV Types         | Definition  |
|------------------|---|
| Financial        | A financial benefit such as: a reduction in operating costs, State labor costs and/or infrastructure costs; cost avoidance; and/or an increase in State revenue.                                      |
| Customer Service | A new or improved customer service (for internal or external customers). Examples include service automation, improved access to information, improved service quality, faster turnaround times, etc. |
| Risk Reduction   | A reduction of a risk to the State as a result of replacing an unstable system, improving security, implementing a sustainable solution, etc.   |
| Compliance       | Meets a previously unmet State or Federal compliance requirement.   |

In the table below, enter a separate line for each Business Value you plan to achieve. You may have more than one of each Business Value type. **For Financial Business Values indicate expected savings &/or increased revenue amount in the Description.** Use Section 10 if needed for more space.

| Business Value Type | Business Value Description | How will Achievement be Measured? |
|---------------------|----------------------------|-----------------------------------|
| Select              |                            |                                   |

What is the business value you expect to achieve from the proposed solution? Categorize the business values you define into one of the 4 types: Financial, Customer Service, Risk reduction, or Compliance. (Definitions of each type are provided in the form.) Fill in the table with a minimum of 1 Business Value. There is space in this section to enter 6 different business values, but you don't have to enter that many. If you have more than 6 continue to list them in the Comments Section (10). Here is an explanation for completing the table:

- **Business Value Type:** Select the Business Value Type from the dropdown list. See definitions of each type in the table above.
- **Business Value Description:** Describe the Business Value. If your Business Value Type = Financial than you must provide the expected dollar savings or revenue increase.
- **How will Achievement be measured?** Describe how you will be able to validate/verify that the Business Value was met. Examples:
  - **Financial:** Measurement will be a before and after comparison of costs or revenue.
  - **Customer Service:** Determine a before and after number that you can compare to verify that you succeeded at improving customer service. Examples include customer satisfaction rates (obtained via a survey), turnaround time, # of new customers, # of customers served, # of something processed, wait time, hold time, # accessing certain data &/or web pages, etc.
  - **Risk Reduction:** Provide a description of how you will know that the risk was reduced. If you succeed in reducing risk than you will have reduced the likelihood of a risk (or even eliminated it) and/or reduced the impact of the risk occurring.
  - **Compliance:** Describe how you will verify that the compliance need was met. Examples: Audits identify unmet compliance requirements, so the measurement of success could be no audit findings or verification from the auditor that the proposed solution met a previously identified audit finding.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 4

This section provides a full picture of the costs of the proposed solution.

|   |        |
|---|--------|
| <b>4. Proposed Solution Costs</b>                         |        |
| Lifecycle of Proposed Solution ( <i>Max is 20 years</i> ) | Yrs    |
| Was a Request for Information (RFI) done?                 | Select |
| If no RFI, indicate your cost est. source:                |        |

- **Lifecycle of Proposed Solution:** Enter how many years you plan to use the proposed solution before investing dollars in substantial upgrades or going back out to RFP. The max you can enter is 20 years and we would not expect to see such a long lifecycle very often. With continual technological advancements in the marketplace, 20 years is a very long time to keep the same technology.
- **Was a Request for Information (RFI) done?** Select yes or no.
- **If no RFI, indicate your cost estimate source:** Doing an RFI is a good way to find out what products are in the marketplace as well as get some realistic cost estimates. If no RFI was done, we want to know where you obtained your cost information to complete the IT ABC. We want to ensure there is a credible source for your cost estimates.

| Description of Costs                                    | Implementation Costs<br>(One Time Project Costs) | Annual Operating Costs<br>(Reoccurring Costs)* |
|---|--|--|
| Configuration/Installation/Implementation               | \$   | \$   |
| Hardware*   | \$   | \$   |
| Equipment or Supplies                                   | \$   | \$   |
| Software/Licenses                                       | \$   | \$   |
| State Labor Cost for Project Management**               | \$   | \$   |
| Other State Labor Costs for Implementing the solution** | \$   | \$   |
| State Labor Cost to Maintain the Solution**             | \$   | \$   |
| Project Management Cost for Contracted Services         | \$   | \$   |
| Other Professional Services                             | \$   | \$   |
| Service Level Agreement/On-going Maintenance Costs      | \$   | \$   |
| Hosting Provider  | \$   | \$   |
| Other Costs (please describe):                          | \$   | \$   |
|   |  |  |
|   |  |  |
| <b>Total Annual Operating Costs</b>                     |  | \$ 0.00  |
| <b>Total Lifecycle Operating Costs</b>                  |  | \$ 0.00  |

- **Implementation Costs:** List all the estimated on-time costs associated with implementing the new solution:
  - **Configuration/Installation/Implementation:** List any one-time vendor costs for configuring, installing and/or implementing the solution.
  - **Hardware:** List any one-time hardware costs to implement the solution. (Enter any on-going hardware costs in the Annual Operating Cost column.)
  - **Equipment or Supplies:** List any one-time equipment or supply costs required to implement the new solution.



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- **Software/Licenses:** List any one-time software/license costs needed to implement/use the solution. (Enter any annual software/license costs in the Annual Operating Costs column.)
- **State labor Cost for Project Management:** If your Project Manager is a state employee, enter the estimated labor hour cost for utilizing that resource for this project. If you know their “fully loaded” hourly wage (i.e., the hourly wage plus benefit amount), then use the exact amount. If not use \$40 per hour, which is the State average (rounded up) based on the most recent HR Workforce Report:  
[http://humanresources.vermont.gov/vthr/hr\\_reporting/workforce](http://humanresources.vermont.gov/vthr/hr_reporting/workforce)
- **Other State Labor Costs for Implementing the solution:** Enter the cost of the State labor to implement the solution (estimate how many resources you expect will be involved, for what percentage of time, and over what period of time). If you know their “fully loaded” hourly wage (i.e., the hourly wage plus benefit amount), then use the exact amount. If not use \$40 per hour.

*Example: Project Duration = 6 Months*

- *Patty will be on the project full-time (26 weeks x 40 hours x \$40) = \$41,600*
- *Marvin will spend 10% of his time on the project (26 weeks x 4 hours x \$40) = \$4,160*
- *Bethany will only be involved in Testing, which is expected to take 2 weeks. (2 weeks x 40 hours x \$40) = \$3,200*

*Total labor estimate (41,600 + 4,160 + 3,200) = \$48,960*

- **State Labor Cost to Maintain the Solution:** N/A for implementation costs.
- **Project Management Costs for Contracted Services:** If you plan to contract for PM services, enter the estimated costs.
- **Other Professional Services:** Include the costs for any other professional services used for the implementation of your new solution.
- **Service Level/On-Going Maintenance Costs:** Leave blank in the implementation costs column, unless there are any one-time starter fees.
- **Hosting Provider:** Leave blank in the implementation column unless there are any one-time starter fees.
- **Other Costs:** Describe and list any other implementation one-time costs that haven’t already been accounted for.

- **Annual Operating Costs:**

- **Configuration/Installation/Implementation:** N/A for annual operating costs, leave blank.
- **Hardware:** If you expect that you will need to purchase hardware for your IT Activity at some point during the lifecycle (or even at multiple points during the lifecycle), estimate the total cost of all that hardware and divide it by the # of years of your lifecycle. This will result in a pro-rated annual cost for that hardware.

*Example: We anticipate that we will need to purchase \$8,000 in new hardware every 5 years over a 20 year lifecycle. Estimated total costs are \$8,000 (year 5) + \$8,000 (year 10) + \$8,000 (year 15) + \$8,000 (year 20) = 32,000 divided by 20 years = \$1,600. Enter \$1,600.*

- **Equipment or Supplies:** List any on-going equipment or supply costs. Pro-rate costs over the lifecycle so that you can list an annual cost.
- **Software/Licenses:** List the annual licensing costs.
- **State labor Cost for Project Management:** N/A for annual operating costs, leave blank.
- **Other State Labor Costs for implementing the solution:** N/A for annual operating costs, leave blank.
- **State Labor Cost to Maintain the Solution:** Estimate the cost of State labor to maintain the solution. You may estimate labor costs using \$40 per hour multiplied by the number of hours to maintain the new solution.



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- **Project Management Costs for Contracted Services:** N/A for annual operating costs, leave blank.
- **Other Professional Services:** Include the costs for any other professional services used for the on-going maintenance of the solution.
- **Service Level/On-Going Maintenance Costs:** Enter the amount that you estimate you will pay a vendor for annual maintenance (if applicable).
- **Hosting Provider:** If you are planning to pay the vendor or a third party to host the data for this IT Activity, enter that estimated annual cost.
- **Other Costs:** Describe and list any other annual operating costs.
- **Total Annual Operating Costs:** This is an auto-calculated field. It will add the column of Annual Operating Costs.
- **Total Lifecycle Operating Costs:** This is an auto-calculated field. It will multiply the Total Annual Operating Costs by the lifecycle.

| Operating Costs of Proposed Solution By Fiscal Year <i>(take into account when you expect to implement):</i> |    |  |     |    |  |
|--|----|--|-----|----|--|
| Current FY   | \$ |  | FY2 | \$ |  |
| FY3  | \$ |  | FY4 | \$ |  |
| FY5  | \$ |  | FY6 | \$ |  |

- **Operating Costs of Proposed Solution by Fiscal Year:** Enter the total amount you expect to spend annually supporting/maintaining this solution for the current, plus next 4 fiscal years. You may not expect to have the solution implemented in the current year, if so enter \$0. If the solution will be implemented part way through a fiscal year, then prorate your expected operating costs for that year. Example: Today is 6/2/15 and I don't expect to implement the solution until 1/1/16. Once implemented, I expect the annually operating costs to be \$30K and increase by 3% annually thereafter. Here's what I would enter:

Current FY = \$0; FY2= \$15K; FY3: \$30K; FY4= \$30,900; FY5= \$31,827

|  |         |
|--|---------|
| <b>Sub-Total Implementation Costs</b>                                | \$ 0.00 |
| • Add 3% DII Estimated Charge for EA & Project Oversight             |         |
| <b>Revised Sub-Total Implementation Costs w/ DII estimated costs</b> | \$ 0.00 |
| <b>Sub-Total Lifecycle Costs (Implementation + Operating)</b>        | \$ 0.00 |
| • Add Independent Review cost if above is over a million             |         |
| <b>Total Implementation Costs</b>                                    | \$ 0.00 |
| <b>Implementation Costs By Fiscal Year:</b>                          |         |
| Current FY   | \$      |
| FY2  | \$      |
| FY3  | \$      |
| FY4  | \$      |
| FY5  | \$      |
| <b>Total Lifecycle Costs</b>   | \$ 0.00 |

- **Sub-Total Implementation Costs:** This is an auto-calculated field. The form adds up the column of Implementation Costs.
  - **3% DII Estimated Charge for EA & Project Oversight:** This is an auto-calculated field. It calculates 3% of the Sub-totalized Implementation Costs to provide an estimate for EA & EPMO billing for this project. This is only an estimate, DII will bill for actual hours which may be less.
- **Revised Sub-Total Implementation Costs:** This is an auto-calculated field. It adds the amounts from the above 2 bullets.



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- **Sub-Total Lifecycle Costs:** This is an auto-calculated field. The Total Lifecycle Operating Costs are added to the Revised Sub-Total Implementation Costs. This total is needed to determine if the project requires an Independent Review.
  - **Add Independent Review (IR) Costs:** This is an auto-calculated field. If the Sub-Total Lifecycle Costs is over a million dollars, the form will add \$25K, which is the maximum cost for a standard Independent Review. An IR is required by statute for IT Activities with lifecycle costs of one million or more.
- **Total Implementation Costs:** This is an auto-calculated field. This is the final total for implementation costs and includes IR costs if applicable.
- **Implementation Costs by Fiscal Year:** Breakout your total implementation costs by the year you will incur them.
- **Total Lifecycle Costs:** This is an auto-calculated field. This is the final estimated lifecycle costs (includes all implementation and operating costs) over the lifecycle of the solution.

| Proposed Solution Costs to the State:                       |         |
|---|---------|
| % of Implementation Costs to be paid with State funds*      | %       |
| Total Implementation Costs to be paid with State funds      |         |
| % of Lifecycle Operating Costs to be paid with State funds* | %       |
| Total Lifecycle Operating Costs to be paid with State funds |         |
| Total Lifecycle Costs to be paid with State funds           | \$ 0.00 |

- **% of Implementation Costs to be paid with State funds:** Enter the % of the total implementation costs that will need to be paid for with State funds.
- **Total Implementation Costs to be paid with State funds:** This is an auto-calculated field. The form will multiple the Total Implementation Costs by the percentage you enter above to determine the amount of State dollars needed to fund the implementation costs of this project.
- **% of Lifecycle Operating Costs to be paid with State funds:** Enter the % of the Total Operating Costs that will need to be paid for with State funds.
- **Total Lifecycle Operating Costs to be paid with State funds:** This is an auto-calculated field. The form will multiple the Total Lifecycle Operating Costs by the percentage you enter above to determine the amount of State dollars needed to fund the on-going operating costs of this solution.
- **Total Lifecycle Costs to be paid with State funds:** This is an auto-calculated field. The form will add the Total Implementation Costs to be paid with State funds with the Total Lifecycle Operating Costs to get the grand total of the cost to the State for this IT activity over its lifecycle.





## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 5

This section provides a summary of the current costs for meeting this business need.

#### **5. Current Solution Costs**

**Important:** Include any additional agency, dept. or program costs to be eliminated or reduced once the new solution is implemented. List these in the "Other Costs".

| Description  | Annual Operating Costs<br>(Reoccurring Costs)* |
|--|--|
| Configuration/Installation/Implementation  | \$   |
| Hardware*  | \$   |
| Equipment or Supplies  | \$   |
| Software/Licenses  | \$   |
| State Labor to maintain the current solution**                                       | \$   |
| State Labor costs for manual processing that will be automated by the new solution** | \$   |
| Other Professional Services  | \$   |
| Service Level Agreement/On-going Maintenance Costs                                   | \$   |
| Hosting Provider   | \$   |
| Other Costs (Please describe):   | \$   |

- **Hardware:** If you were to maintain the current solution for the stated lifecycle in Section 4, estimate your hardware costs. Pro-rate your total hardware costs over the number of years in the lifecycle to determine an annual cost.  
*Example: We will need to purchase \$8000 in new hardware every 5 years over a 20 year lifecycle. Estimated total costs are \$8,000 (year 5) + \$8,000 (year 10) + \$8,000 (year 15) + \$8,000 (year 20) = \$32,000 divided by 20 years = \$1,600. Enter \$1,600.*
- **Equipment or Supplies:** Enter the average annual costs for any equipment or supplies that will be needed to operate the current solution.
- **Software/Licenses:** Enter the annual software/license costs.
- **State Labor Cost to Maintain the Solution:** Enter the cost of State labor to maintain the current solution. You may estimate labor costs using \$38 per hour multiplied by the number of hours.
- **State labor costs for manual processing that will be automated by the new solution:** Enter the State labor costs for any manual processing that will be eliminated by the new solution. You may estimate labor costs using \$38 per hour.  
*Example: It takes one person 20 hours per week to manually data enter information into a current system. Once the new solution is live it is expected that this manual data entry will take only 5 hours per week. Based on this, the expected savings is 15 hours per week. 15 hours x \$40 x 52 weeks in a year = \$31,200. \$31,200 is the amount you would enter on this line.*
- **Other Professional Services:** Include the annual costs for any other professional services needed for the on-going operation of the current system.
- **Service Level/On-Going Maintenance Costs:** Enter the annual amount that you currently pay a vendor for maintenance on the current solution. If the solution is maintained internally, enter the State Labor costs on the "State Labor Costs to maintain the current Solution" line.
- **Hosting Provider:** Enter the annual cost you pay a vendor or a third party to host the data for the current solution.
- **Other Costs:** Describe and list any other annual costs that will be reduced or eliminated once the new solution is implemented.





## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

|  |    |  |     |    |  |         |    |
|--|----|--|-----|----|--|---------|----|
|  |    |  |     |    |  |         |    |
| <b>Total Annual Operating Costs</b>  |    |  |     |    |  | \$ 0.00 |    |
| <b>Total Lifecycle Costs</b> (using the new Proposed Solution's lifecycle)   |    |  |     |    |  | \$ 0.00 |    |
| <b>Current Operating Costs By Fiscal Yr</b> <i>(take into account when you expect the new solution to be implemented):</i> |    |  |     |    |  |         |    |
| Current FY   | \$ |  | FY2 | \$ |  | FY3     | \$ |
| FY4  | \$ |  | FY5 | \$ |  |         |    |

- Total Annual Operating Costs:** This is an auto-calculated field. It will add the column of Annual Operating Costs.
- Total Lifecycle Operating Costs:** This is an auto-calculated field. It will multiply the Total Annual Operating Costs by the lifecycle.
- Operating Costs of Proposed Solution by Fiscal Year:** Enter the total amount you will spend annually supporting/maintaining the current solution until the new solution is implemented. For example, if you expect the new solution to be implemented as of 7/1 on FY2, then the operating costs for FY2-FY5 would be zero.

|  |   |
|--|---|
| <b>Current Solution Costs to the State:</b>            |   |
| % of Current Operating Costs paid for with State funds | % |
| Total Lifecycle Costs to be paid with State funds      |   |

- % of Current Operating Costs paid with State funds:** Enter the % of the Total Operating Costs that are currently paid for with State funds.
- Total Lifecycle Operating Costs to be paid with State funds:** This is an auto-calculated field. The form will multiple the Total Lifecycle Operating Costs by the percentage you enter above to determine the amount of State dollars needed to fund the on-going operating costs of this solution.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 6

The purpose of this section is to assess whether implementing your new IT Activity will increase, decrease or have no impact on State costs.

#### **6. Net Impact to State Costs**

The following costs will be auto-populated based on the information entered in Sections 4 and 5.

| Cost  | Dollar Amount |
|---|---------------|
| Proposed Solution Lifecycle Costs to be paid by the State | \$ 0.00       |
| Current Solution Lifecycle Costs to be paid by the State  |               |
| Amount of Increase  |               |
| Amount of Decrease  |               |

If the above table shows an Increase in costs, enter the name and title of the authorizing official (Secretary, Commissioner or their Deputy) that should approve the increase. *The OPM will route this form for his/her signature once the review process is complete.*

|                            |  |
|----------------------------|--|
| Authorizing Official Name  |  |
| Authorizing Official Title |  |

- **Proposed Solution Lifecycle Costs to be paid by the State:** This is an auto-calculated field. The form obtains the total from Section 4.
- **Current Solution Lifecycle Costs to be paid by the State:** This is an auto-calculated field. The form obtains the total from Section 5.

**One of the following fields will be auto-populated & one will be blank:**

- **Amount of Increase:** This is an auto-calculated field. It populates only if the Proposed Solution Lifecycle Costs to be paid by the State are greater than the Current Solution Lifecycle Costs to be paid by the State.
- **Amount of Decrease:** This is an auto-calculated field. It populates only if the Proposed Solution Lifecycle Costs to be paid by the State are less than the Current Solution Lifecycle Costs to be paid by the State.
- **Authorizing Official Name:** If there is a dollar amount on the Amount of Increase line, enter the name of the Secretary, Deputy Secretary, Commissioner or Deputy Commissioner that will authorize that increase. The EPMO assigned OPM will obtain that person's e-signature after the review process is complete. Leave this line blank if State costs are not increasing.
- **Authorizing Official Title:** If there is a dollar amount on the Amount of Increase line, enter the title of the person you listed as the Authorizing Official on the line above. It must be a Secretary, Deputy Secretary, Commissioner or Deputy Commissioner. Leave this line blank if State costs are not increasing.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 7

#### 7. Budget Information

|   |        |
|---|--------|
| Are your Business Office & Commissioner aware of this project and the plans for funding it?                             | Select |
| If State funding is required do you have the money to pay for this year's costs out of your current fiscal year budget? | Select |
| If "No" to the above, what is your plan to obtain funding?  |        |
| Was the cost of this solution approved in your most recent budget submission to Finance & Management?                   | Select |

- **Are your Business Office & Commissioner aware of this project and the plans for funding it?** Select yes or no from the dropdown list.
- **If State funding is required, do you have the money to pay for all the current fiscal year costs of this IT Activity/Project out of your current budget?** Select yes or no to indicate if you already have the funding to cover the costs that you expect to incur this fiscal year.
- **If you answered No to the above, what is your plan to obtain funding?** Tell us the source of the funding for this fiscal year for this IT Activity/project.
- **Was this IT Activity included in your budget submission to Finance & Management for the current fiscal year?** Select yes or no to indicate if you have already budgeted for this IT Activity.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 8

This section provides information about how other governmental entities are solving the same/similar business problem.

| 8. Leveraging the Success of Others  |  |
|--|--|
| Are there other State, Federal or Municipal government entities using the proposed solution to meet a similar business need? |  |
| Select   |  |
| If yes to the above, what governmental entity or entities?   |  |
| If no, why are we choosing a solution that no other government entity uses?  |  |

- **Are there other State, Federal or Municipal government entities using the proposed solution to meet a similar business need?** Select yes or no from the dropdown list.
- **If yes to the above, what governmental entity or entities?** List the name or names of the government entities that are already using the proposed solution. Include any information about what their experience has been using this solution and how that entity is similar to VT (&/or your Agency, Department or State entity).
- **If no, why are we choosing a solution that no other government entity uses?** It is inconsistent with the State's IT Strategy to be the first to use a technology to meet specific needs. We want to see it work successfully elsewhere, have the kinks in deployment worked out and learn from the experience of others. If you responded No to the first question in this section, explain why we aren't using an already tried and true solution.

### Instructions for Section 9

This section provides an assessment of risk.

| 9. Risks   |  |
|--|--|
| What are the risks of doing nothing (i.e., staying with the current solution)? |  |
| What are the risks of moving forward with the proposed solution?               |  |

- **What are the risks of doing nothing (i.e., staying with the current solution)?** Describe what is the worst thing(s) that can happen if we choose to stay with the current solution (i.e., what are the disadvantages to the State?).
- **What are the risks of moving forward with the proposed solution?** Describe what could go wrong if a decision is made to go forward with the new solution. Please also describe your mitigation plan for any listed risks.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### Instructions for Section 10

Use this section to provide any additional explanations or information for consideration in the approval of this business case.

#### **10. Comments**

Please enter any additional comments or Business Justifications that should be taken into consideration.

### Instructions for Section 11

#### **11. Approvals**

The Oversight Project Manager (OPM) will collect all electronic signatures once the review process is complete. Approval is required from:

- The Agency's IT Lead: OPM will route to the person you listed on Section 1 of this form. It should be the Chief Information Officer (CIO) or the Agency's/Department's Senior IT Manager if the Agency does not have a CIO. No signature is required if your entity does not have any IT staff.
- A Secretary, Deputy Secretary, Commissioner or Deputy Commissioner only if the impact to net operating costs is an increase. The OPM will route to the person you listed in Section 6 of this form.
- The Chief Technology Officer for the State or Vermont and DII Commissioner.

| Approver  | Signature |
|---|-----------|
| Agency's IT Lead  |           |
| Authorizing Official ( <i>Secretary, Commissioner or their Deputy</i> ) |           |
| State CIO & DII Commissioner  |           |

The Business does not need to fill anything in this section. The assigned OPM will facilitate the review and approval and inform you (i.e. the submitter) when it has been approved or if any additional information is being requested.



## Instructions for Completing the IT Activity Business Case & Cost Analysis (IT ABC) Form

### **Instructions for Section 12**

Use this section to track versions of your document whenever it is updated.

#### **12. Revision History**

| Version | Date | Author | Revision Notes |
|---------|------|--------|----------------|
|         |      |        |                |
|         |      |        |                |
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If you have additional questions about completing this form for your specific project, please contact your assigned Oversight Project Manager (OPM). If you don't know who this is, please email your questions to [dii.epmo@state.vt.us](mailto:dii.epmo@state.vt.us).